



County of San Bernardino

F A S

STANDARD CONTRACT

FOR COUNTY USE ONLY

DO NOT ENCUMBER

<input type="checkbox"/> New <input checked="" type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code HIGHDES179	SC	Dept. A	Contract Number 02-1206 A-1		
County Department Probation Department		Dept. Orgn. PRB		Contractor's License No.		
County Department Contract Representative Holly Benton		Telephone (909) 387-5918		Total Contract Amount Not to Exceed \$10,000		
Contract Type <input type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input checked="" type="checkbox"/> Unencumbered <input type="checkbox"/> Other:						
If not encumbered or revenue contract type, provide reason: <u>Fee for Service Contract</u>						
Commodity Code		Contract Start Date 11/19/02	Contract End Date 06/30/04	Original Amount Not to Exceed \$10,000	Amendment Amount	
Fund AAA	Dept. PRG	Organization 1913	Appr. 200	Obj/Rev Source 2445	GRC/PROJ/JOB No. 40000DRC	Amount Not to Exceed \$10,000
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
Project Name <u>Counseling Services</u>			Estimated Payment Total by Fiscal Year			
			FY	Amount	I/D	
Contract type - 1						

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino probation Department, hereinafter called the County, and

Name

High Desert Child, Adolescent and Family Services
Center

hereinafter called

Contractor

Address

16248 Victor Street

Victorville, CA 92392

Phone

(909) 886-6737

Birth Date

Federal ID No. or Social Security No.

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend contract # 02-1206, as follows:

Section V. Fiscal Provisions

Amend the last sentence of Section V, Paragraph D, page 10 of 14, to read as follows:

Invoices are to be mailed to:
San Bernardino County Probation Department
175 West Fifth Street
San Bernardino, CA 92415
ATTN: Holly Benton, AB 1913 Coordinator

Section VIII. Term

Amend Section VIII, page 12 of 14, to read as follows:

This contract is effective as of November 19, 2002 and is extended from its original expiration date of June 30, 2003, to expire on June 30, 2004 but may be terminated earlier in accordance with provisions of Section IX of the Contract. This Contract may be extended for one additional 12 month period if funding is available and subject to approval of an amendment to this contract by both the County and the Contractor.

Section X. General Provisions

Amend Section X, Paragraph A, page 12 of 14 to read as follows:

When notices are required to be given pursuant to this Contract, the notices shall be in writing and mailed to the following respective addresses listed below.

Contractor: High Desert Child, Adolescent and Family Services Center
16248 Victor Street
Victorville, CA 92392

County: County of San Bernardino Probation Department
175 West Fifth Street
San Bernardino, CA 92415
ATTN: Holly Benton, AB 1913 Coordinator

County (***Insurance Information Only***):
County of San Bernardino
c/o Insurance Data Services
P. O. Box 12010-CB
Hemet, CA 92546-8010

All other terms and conditions remain in full force and effect.

COUNTY OF SAN BERNARDINO

High Desert Child, Adolescent and Family Services Center

(Print or type name of corporation, company, contractor, etc.)

►
Dennis Hansberger, Chairman, Board of Supervisors

By ► Mark Erickson
(Authorized signature - sign in blue ink)

Dated _____

Name _____
(Print or type name of person signing contract)

SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD
Clerk of the Board of Supervisors
of the County of San Bernardino.

Title Executive Director
(Print or Type)

Dated _____

By _____
Deputy

Address 16248 Victor Street
Victorville, CA 92392

Approved as to Legal Form

Reviewed by Contract Compliance

Presented to BOS for Signature

►
Dawn Stafford, Deputy County Counsel

►
Lori Ciabattini, HSS Contracts Unit

►
Raymond B. Wingerd, Chief Probation Officer

Date _____

Date _____

Date _____

Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By